SINO BIOPHARMACEUTICAL LIMITED
中國生物製藥有限公司

(Incorporated in the Cayman Islands with limited liability)
Website: www.sinobiopharm.com
(Stock code: 1177)

VOLUNTARY ANNOUNCEMENT
PHASE III STUDY RESULTS OF CULMERCICLIB IN COMBINATION WITH FULVESTRANT FOR FIRST-LINE TREATMENT OF ADVANCED BREAST CANCER WAS PRESENTED AT ESMO 2025

The board of directors (the "**Board**") of Sino Biopharmaceutical Limited (the "**Company**", together with its subsidiaries, the "**Group**") announces that the Group has announced the interim analysis results of the Phase III clinical study (CULMINATE-2) of culmerciclib (CDK2/4/6 inhibitor), a national Category 1 innovative drug, for the first-line treatment of HR+/HER2-advanced breast cancer by means of Late Breaking Abstract (LBA) at the European Society of Medical Oncology (ESMO) Congress 2025.

CULMINATE-2 is the first Phase III clinical study in the world that achieved positive results for oral CDK2/4/6 inhibitor in combination with endocrine treatment for the first-line treatment of HR+/HER2-advanced breast cancer. It is a randomised, double-blind, multicentre, parallel-controlled study designed to evaluate the efficacy and safety of culmerciclib in combination with fulvestrant (study group) versus placebo combined with fulvestrant (control group) in patients with HR+/HER2-advanced breast cancer following endocrine treatment. The main researchers are an academician, Erwei Song of Sun Yat-sen Memorial Hospital of Sun Yat-sen University and a professor, Yinyong Yin of Jiangsu Province Hospital.

Research data [1]

- The primary endpoint was median progression-free survival (PFS) as assessed by investigators (INV): NR (not yet reached) vs 20.2 months in the study group versus the control group, with a 44% reduction in the risk of disease progression/death (HR=0.56, P=0.0004).

- The secondary endpoint was median PFS as assessed by the Independent Review Committee (IRC): NR (not yet reached) vs 22.0 months in the study group versus the control group, with a 60% reduction in risk of disease progression/death (HR=0.40, P<0.0001).

- Objective response rate (ORR): 59.3% vs 42.3% (P=0.0009) in the study group versus the control group.

- Median duration of response (DoR): NR (not yet reached) vs 16.7 months (HR=0.45, P=0.0064) in the study group versus the control group.

- PFS benefit in the study group was consistent in the vast majority of preset subgroups (HR<1). Among them, in subgroups with poor prognosis, such as visceral metastasis (HR=0.57) and liver metastasis (HR=0.42), such combination regimen showed a more significant PFS advantage.

- The most common treatment-related adverse events (TRAEs) of the combination regimen of culmerciclib are mostly grade 1-2. Among them, the myelosuppressive toxicity such as grade ≥ 3 neutropenia was only 20.3%, and the incidence of adverse events leading to treatment termination was only 3.5%. The safety of long-term treatment was controllable and manageable.

Culmerciclib is a new type of oral CDK2/4/6 inhibitor with varying degrees of inhibitory effects on CDK2, CDK4, and CDK6. It demonstrates particularly strong selective inhibition of CDK4, while having weaker inhibition of CDK6 [2]. This characteristic helps delay the clinical resistance of CDK4/6 inhibitors while alleviating myelosuppression, and is expected to demonstrate breakthrough advantages in efficacy and safety, making it a potential best-in-class therapy.

In July 2024, the Centre for Drug Evaluation of the National Medical Products Administration of the PRC (CDE) accepted the marketing application of culmerciclib in combination with fulvestrant for the treatment of HR+/HER2 locally advanced or metastatic breast cancer following endocrine treatment. In July 2025, the CDE accepted a marketing application for its second indication for the initial endocrine therapy of patients with HR+/HER2 locally advanced or metastatic breast cancer. At present, the Group is also actively advancing the Phase III clinical trial of culmerciclib for adjuvant treatment of breast cancer, and has completed the enrollment of all subjects, and is expected to submit a marketing application in the next two years.

Culmerciclib is expected to fully cover the entire cycle of first-line, post-line, and adjuvant therapy for HR+/HER2-breast cancer, providing innovative treatment options for more patients.

Source:

[1] Erwei Song, Yinyong Yin, et al. Culmerciclib Plus Fulvestrant as First-Line Treatment for HR+/HER2-Advanced Breast Cancer: A Phase 3 Trial (CULMINATE-2). ESMO 2025 (LBA25).

[2] Zhaobing Xu, Yingchun Liu, et al. Discovery and preclinical evaluations of TQB3616, a novel CDK4-biased inhibitor. Bioorg Med Chem Lett. 2024 Jul 15;107:129769.

By order of the Board
Sino Biopharmaceutical Limited
Tse, Theresa Y Y
Chairwoman

Hong Kong, 21 October 2025

As at the date of this announcement, the Board of the Company comprises six executive directors, namely Ms. Tse, Theresa Y Y, Mr. Tse Ping, Ms. Cheng Cheung Ling, Mr. Tse, Eric S Y, Mr. Tse Hsin, and Mr. Tian Zhoushan, and five independent non-executive directors, namely Mr. Lu Zhengfei, Mr. Li Dakui, Ms. Lu Hong, Mr. Zhang Lu Fu and Dr. Li Kwok Tung Donald.